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CONFIRMATION NO. 4629

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| 10/613,949 | 07/03/2003 RULE | 600 | 3762 | 716875.6 |

APPLICANTS

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**** CONTINUING DATA *******

This application is a DIV of 09/805,523 03/13/2001 PAT 6,632,169

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****
10/01/2003

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|---------------------------|---|--------------------------------|---|------------------|--------|--------------|--------------------|
| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | STATE OR COUNTRY | SHEETS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| Verified and Acknowledged | (ALYSSA M. ALTER/ Examiner's Signature) | | Initials | MO | 22 | 58 | 22 |

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TITLE

Optimized pulsatile-flow ventricular-assist device and total artificial heart

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|-----------------------------|---|---|
| FILING FEE RECEIVED 2465 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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